



THIRD PARTY PROGRAM APPLICATION

APPLICATION SUBMISSION PACKAGE

LANGUAGE PREFERRED ☐ English ☐ Spanish ☐ Chinese ☐ Vietnamese ☐ Amharic ☐ Korean ☐ Other: _____

The Department of Consumer and Regulatory Affairs operates the Third Party Program set forth under the Homestart Regulatory Improvement Amendment Act of 2002 (DC Official Code, 2001 Ed. §6-1405.02.) and Title 12A of the District of Columbia Municipal Regulations (DCMR), § 105.3.1.1. Participation in the Third Party Program requires certification for all program participants. The Third Party Program Application Submission Package must be completed and is accepted only submitted within a 1" binder with all information organized in chronological order.

Section A APPLICANT/BUSINESS INFORMATION

AGENCY NAME _____
 STREET ADDRESS _____ SUITE or APARTMENT NUMBER _____
 CITY _____ STATE _____ ZIP CODE _____
 PHONE NUMBER () _____ - _____ EMAIL _____ @ _____
 FAX NUMBER () _____ - _____ WEBSITE _____
 POINT OF CONTACT _____ POSITION _____
 AUTHORIZED SIGNATURE _____ NAME _____
 DATE _____

Section B THIRD PARTY PROGRAM STAFF ROSTER

Please complete the following section and also attach a separate PDF document detailing each individual's qualifications and experience.

NAME _____ POSITION _____
 CERTIFICATION(S) _____

NAME _____ POSITION _____
 CERTIFICATION(S) _____

NAME _____ POSITION _____
 CERTIFICATION(S) _____

NAME _____ POSITION _____
 CERTIFICATION(S) _____

NAME _____ POSITION _____
 CERTIFICATION(S) _____

Section B **THIRD PARTY PROGRAM STAFF ROSTER** *continued*

NAME _____ POSITION _____
 CERTIFICATION(S) _____

NAME _____ POSITION _____
 CERTIFICATION(S) _____

NAME _____ POSITION _____
 CERTIFICATION(S) _____

NAME _____ POSITION _____
 CERTIFICATION(S) _____

NAME _____ POSITION _____
 CERTIFICATION(S) _____

NAME _____ POSITION _____
 CERTIFICATION(S) _____

DC INSPECTOR GENERAL HOTLINE: If you are aware of corruption, fraud, waste, abuse or mismanagement involving any DC government agency, official or program, Contact the Office of the Inspector General (OIG) at (202) 727-0267 or (800) 521-1639 (toll free). All reports are confidential and you may remain anonymous by law. Government employees are protected from reprisals or retaliation by their employers for reporting to the OIG. The information you provide may result in an investigation leading to administrative action, civil penalties or criminal prosecution in appropriate cases.

NOTICE OF NON-DISCRIMINATION: In accordance with DC Human Rights Act of 1977, as amended, DC Code Section 2.1401.01 et seq., (“the Act”) the District of Columbia does not discriminate on the basis of race, color, national origin, sex, age, marital status, sexual orientation, family responsibilities, matriculation, political affiliation, disabilities, source of income, or place of residence or business. Discrimination in violation of this act will not be tolerated. Violators will be subject to disciplinary action.

Section C Quality Assurance Plan

Provide a quality assurance plan, which includes details about the internal processes for ensuring that the agency will perform assigned inspections/reviews, report nonconforming or deficient items to the attention of the owner and contractor. Provide timely reports for each inspection/review and submit a final signed report to DCRA's Third Party Program. Attach additional sheets if necessary.

Section D CONFLICT OF INTEREST AFFIDAVIT

Provide a notarized, sworn affidavit, signed by the Inspection Agency, attesting that the Third Party Program Agency, Professional(s)-in-Charge, Supervisory Inspector(s) (if different from the Professional(s)-in Charge), and its inspectors shall, in the course of performing duties related to the District's Third Party Inspection Program and except as related specifically to the Third Party Program Agency named in the application, abide by the same standards of ethical conduct as are required of District government employees in particular that they shall abide by those standards found in 6-B DCMR §1800.1, 1803.1-1803.3, 1805.1-1805.2, 1806, and 1808; and additionally attesting that they will remain independent of conflicts of interest in accordance with the Homestart Regulatory Improvement Act of 2002, codified as D.C. Official Code, 2001 Ed. §6-1403.01 et seq. (2006 Supp.) Please attach affidavit to this application package.

Section E PROOF OF INSURANCE

Provide a copy of the agency's insurance policy clearly identifying a Minimum General Liability and Errors and Omissions Coverage for each occurrence in the amount of One Million Dollars (\$1,000,000), with the District of Columbia listed as additional insured. Please attach copy of insurance policy to this application package.

Section F AGENCY QUALIFICATIONS

Provide a brief statement of the agency's qualifications and background. Attach additional sheets if necessary.

DCRA OFFICIAL USE ONLY

RECEIVED BY _____

DATE _____

REVIEW DATE _____

☐ APPROVED _____

NOTIFICATION DATE _____

CERTIFICATION NUMBER _____

☐ DISAPPROVED _____

NOTIFICATION DATE _____

ADDITIONAL INFORMATION REQUIRED _____

NOTIFICATION DATE _____